



Serving the People of California

State of California / Health and Welfare Agency / Employment Development Department

RELEASE OF BUYER REQUEST FORM

Pursuant to Section 1732 of the California Unemployment Insurance Code, I hereby request a Certificate of Release of Buyer (DE 2220/DE 2220A) be issued to:

BUYER:

EDD ACCOUNT NUMBER:

(If applicable)

NAME: _____

DBA: CURRENT _____

NEW (If applicable) _____

ADDRESS: _____

PHONE #: _____ FAX #: _____

SELLER:

EDD ACCOUNT NUMBER:

(If applicable)

NAME: _____

DBA: _____

BUSINESS _____

ADDRESS: _____

PHONE #: _____ FAX #: _____

FEIN #: _____

FORWARDING _____

ADDRESS: _____

FORWARDING _____

PHONE #: _____

ESCROW CO:

DATE OF REQUEST: _____

NAME: _____ ESCROW OFFICER: _____

ADDRESS: _____

PHONE #: _____ FAX #: _____

ESCROW #: _____ PURCHASE PRICE: \$ _____

ESTIMATED CLOSING/TRANSACTION DATE: _____

SPECIAL INSTRUCTIONS: _____